PÁTENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number
P119 US1

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THA							
TOTAL CLAIMS .			30					RATE	FEE		RATE	FEE			
FO	R		NUMBER FILED		ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00				
TOTAL CHARGEABLE CLAIMS 30 minus 20=					• 1	10	•	X\$ 9=	90	OR	X\$18=				
INDEPENDENT CLAIMS # minus 3 =					•	1		X40=	490	OR	X80=				
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		1	+270=				
* If the difference in column 1 is less than zero, enter						olumn 2			HØ5	OR	TOTAL				
CLAIMS AS AMENDED - PART II								TOTAL		JOA	OTHER	THAN			
(Column 1) (Column 2) (Column 3)							, 71 /	SMALL		OR	SMALL	ENTITY			
AMENDMENT A	6/1/05	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total "	· 30	Minus ·	•• (8	30 =			X\$ 9=		OR	X\$18=				
AME	Independent	* H	Minus	***	C.f.	= /		X40=		OR	X80=				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=				
							8	TOTAL		OR	TOTAL				
ADDIT. FEEON_ADDIT. F															
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=				
	independent	*	Minus	***		-		X40=		OR	X80=				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=				
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE				
(Column 1) (Column 2) (Column 3)															
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=				
	Independent	AITATION OF ASS	Minus	CAIDEAIT	CLAINA	=		X40=		OR	X80=				
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	-	OR	+270=				
• 1	f the entry in colu f the "Highest Mus	mn 1 is less than the	e entry in colu	mn 2, write	"O" in co	lumn 3. n 20. enter *20.		TOTAL		! ∩₽	TOTAL				
***	If the "Highest Nu	mber Previously Pa	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												